

Doctors Are Losing Their Professional Authority to Select Safest Treatment

September 11, 2019

Eighteen years ago, following the 9/11 catastrophe, President George W. Bush offered an explanation as to WHY we were targeted in a joint session of Congress:

“They hate our freedoms — our freedom of religion, our freedom of speech, our freedom to vote and assemble and disagree with each other.”

The current targets aimed for demolition are those very same freedoms:

- freedom of religion,
- freedom of speech,
- freedom of choice,
- freedom to assemble and disagree with each other, and
- freedom from surveillance.

This time the perpetrators are visible; they are the elected officials who are abusing their authority and betraying the public trust/ They are protecting the interest of their large campaign contributors and the flow of other bribes and kickbacks.

These arrogant public officials are demoting and intimidating medical doctors who put the interest of their patients first, and who recognize the inviolable right to informed consent to medical interventions. Doctors who are sworn to “do no harm” are being ordered to vaccinate those children who they have reason to believe will be harmed.

California is the state that has the ignoble record of having forcibly sterilized the largest number of victims, except for Nazi Germany. This time, California has targeted babies, parents, and medical doctors as enemies under state control.

With the passage of SB276, doctors practicing in California have been striped of their professional authority to make medical decisions based on their clinical judgement for children in their care. Doctors will be subjected to monitoring by state officials, much like prisoners on parole.

Below, is a poignant letter to the Governor of California from a medical doctor in that state. The following post will be the Testimony by AHRP board member, Meryl Nass, MD.

Elisa Song, MD – Healthy Kids Happy Kids

Dear Honorable Governor Newsom,

I am a California-licensed, board-certified, Stanford-, NYU, & UCSF-trained pediatrician. I am not anti-vax. I administer vaccines in my pediatric practice. I believe that vaccines can be effective at reducing the risk of vaccine-preventable diseases for MOST children. I believe that vaccines are safe for MOST children. But not for all...

I am not a “hysterical anti-vaxxer.” I am not the mother of a vaccine-injured child. I am not an unethical doctor selling “fake” medical exemptions. I am not a bureaucrat or a politician.

I am a pediatrician in the trenches. And I am unashamedly, unabashedly, and unequivocally PRO-CHILD. I believe in public health, yet I care for individual children and families who sit across from me everyday, trusting that I am giving them valid, scientific, evidence-based information that will keep their individual baby safe and healthy, and believing that I am providing them with true informed consent.

I am a pediatrician trying to do the best I can for the children in my practice. And the best is not simply repeating that vaccines are “safe and effective.” Because they’re not 100% safe. Because they’re not 100% effective. Because parents are asking questions. Because parents are afraid and want to do the best for their children. And because we, as primary care physicians, need to be able to practice the art and science of medicine to the best of our abilities, for the child sitting in front of us, without bureaucratic handcuffs and fear of retribution.

SB 276 continues to place the decision regarding an individual child’s vaccine risk/benefit assessment and whether or not that child qualifies for a vaccine medical exemption in the hands of the government. As clearly stated by Andrew Kroger M.D., M.P.H., Communications and Education Branch of the Immunization Service Division of the CDC: “It would be inappropriate for anyone other than the treating provider to determine who should be allowed to get a medically-necessary exemption.”

SB 276 continues to too narrowly limit the criteria for “appropriate” vaccine exemptions to those contraindications detailed by the CDC, AAP and ACIP. These criteria do not take into account the emerging field of vaccinomics pioneered by the Mayo Clinic and the latest research on increased risk for various chronic illnesses including autoimmunity after vaccination in certain vulnerable populations. Epigenetics is making it increasingly clear that the one-size-fits-all CDC schedule will not work. Dr. Kroger to this end emphasizes that: “The ACIP guidelines were never meant to be a population-based concept... The CDC does not determine medical exemptions. We define contraindications. It is the medical provider’s prerogative to determine whether this list of conditions can be broader to define medical exemptions.”

SB276 continues to essentially eliminate all medical exemptions, even those consistent with the CDC, ACIP or AAP guidelines. By arbitrarily limiting the number of medical exemptions a physician may write to 4 in any calendar year before triggering investigation, SB 276 will deter



physicians from writing ANY exemptions for fear of irreparable damage to their professional reputation, financial security, and emotional trauma, even if ultimately found innocent. How will a physician decide which 4 children are “deserving” of medical exemptions each year, in order to prevent an automatic investigation once they write that 5th exemption?

And how can a physician who has sworn the Hippocratic oath to “Do No Harm” ethically give that 5th child vaccines for which even the “standard of care” deems vaccinations unsafe or unnecessary? These are unwinnable, untenable situations for any physician or patient to be placed in. What our Legislators need to understand is that while we, as physicians, bear tremendous risk and liability – personally, professionally and financially – associated with writing valid medical exemptions, there is NO liability for giving contraindicated vaccinations, even if they cause foreseeable yet preventable harm.

The proposed amendments in SB 714 do NOT adequately address the above concerns.

I thank you so much for your time and consideration in reading this letter and respectfully request that you VETO SB 276 and SB 714. A Harvard study has found that 2.6% of people vaccinated will have a vaccine injury. California’s current medical exemption rate of 0.7% falls far below this number, implying that there are many children whose vaccine injuries could have been avoided if an appropriate medical exemption were written by their physician.

Until such time when vaccine risks and benefits can be clearly defined in broader terms that take into account personal and family history and epigenetics, this risk needs to be taken on by each parent and each child. And where there is risk, there must be choice. And where there is uncertainty, the BEST person to help that parent navigate vaccines is the person who knows that child’s medical and family history best – THEIR PHYSICIAN.

Sincerely,
Elisa H. Song, MD
Belmont, CA
xo Elisa